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RICHARD M. SHARKANSKY PO BOX 557 MASHPEE, MA 02649					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUB FFE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
11/28/2005 HDEMESS2 00000056 050889 09540825					Riehard M. Sharkansky (Depositor's same)			
,,					1111 1111	10 11.1	(Signature)	
01 FC:1501 02 FC:8001	1400.00 DA 30.00 DA				11-	28-12005	(Case)	
	APPLICATION NO. FILING DATE			FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	09/540,825 03/31/2000			David L Black 07072-100001 2354				
	TITLE OF INVENTION: DATA STORAGE SYSTEM HAVING SEPARATE DATA TRANSFER SECTION AND MESSAGE NETWORK WITH PLURAL DIRECTORS ON A COMMON PRINTED CIRCUIT BOARD AND REDUNDANT SWITCHING NETWORKS							
	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEB	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400)	\$0	\$1400 12/09/2005		
	EXAMINER		ARTUN	ART UNIT CLASS-SUBCLASS]	•	
	LEE, CHRISTOPHER E		2112	710-317000				
	Change of correspondence address (or Change of Correspondence Address from PTO/SB/121) attached. The Address from PTO/SB/1221 attached. The Address indication (or "Fee Address" Indication form PTO/SB/127; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) EMC Corporation							
	Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual Corporation or other private group entity 🔘 Government							
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	Advance Order - # of	Deposit Account	5d The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 05-0889 (enclose an extra copy of this form).					
	3. Change in Entity Status (from status indicated above)				t is no longer claiming SMALL ENTITY stems. See 37 CFR 1.27(g)(2).			
	a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. Lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27. Lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27. Lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27.							
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	Authorized Signature Alle Roux				Date	11-28-2	001	
	Typed or printed name	Registration No. 25, 800						
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